

**DECLARATION FOR UTILITY OR  
DESIGN PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 e)) required)

Attorney Docket Number	2102483-906310
First Named Inventor	Mikhail Godkin
Application Number	New
Filing Date	Herewith
Group Art Unit	Unknown
Examiner Name	Unknown

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LONG STROKE LINEAR VOICE COIL ACTUATOR WITH THE PROPORTIONAL SOLENOID TYPE CHARACTERISTIC

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim the benefit under 37 U.S.C. §119(e) of any United States Provisional Application(s) below.

Prior Foreign Application Number(s)	Country	Filing Date (MM/DD/YYYY)	Priority Not Claimed	YES	Certified Copy Attached?
60/271,902	US	February 27, 2001	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		29585	OR <input type="checkbox"/> Correspondence address below							
<p><b>Name</b> Gerald T. Sekimura</p> <p><b>Address</b> 139 Townsend Street, Suite 400</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%; padding: 5px;"><b>City</b> San Francisco</td> <td style="width: 33.33%; padding: 5px;"><b>State</b> CA</td> <td style="width: 33.33%; padding: 5px;"><b>ZIP</b> 94107-1922</td> </tr> <tr> <td style="padding: 5px;"><b>Country</b> U.S.</td> <td style="padding: 5px;"><b>Telephone</b> (415) 836-2500</td> <td style="padding: 5px;"><b>Fax</b> (415) 836-9220</td> </tr> </table>					<b>City</b> San Francisco	<b>State</b> CA	<b>ZIP</b> 94107-1922	<b>Country</b> U.S.	<b>Telephone</b> (415) 836-2500	<b>Fax</b> (415) 836-9220
<b>City</b> San Francisco	<b>State</b> CA	<b>ZIP</b> 94107-1922								
<b>Country</b> U.S.	<b>Telephone</b> (415) 836-2500	<b>Fax</b> (415) 836-9220								
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>										
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Mikhail		Family Name or Surname Godkin								
Inventor's Signature 		Date 2/21/02								
Residence: City San Diego		State CA	Country US	Citizenship US						
Mailing Address 4414 Exbury Court										
City San Diego		State CA	ZIP 92130	Country US						
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])		Family Name or Surname								
Inventor's Signature		Date								
Residence: City		State	Country	Citizenship						
Mailing Address										
City		State	ZIP	Country						
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.										

<b>POWER OF ATTORNEY BY ASSIGNEE</b>	In re Application for: Mikhail Godkin
	Application No.: New
	Filed: Herewith
	For: LONG STROKE LINEAR VOICE COIL ACTUATOR WITH THE PROPORTIONAL SOLENOID TYPE CHARACTERISTIC
	Attorney Docket No.: 2102483-906310

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Sir:

The undersigned, being Assignee of the entire right, title and interest in the above-identified patent application by virtue of an Assignment

recorded at the United States Patent and Trademark Office at

011583 reel/frame 0264 , dated February 26, 2001

OR

submitted to the United States Patent and Trademark Office for recordation on  
(copy enclosed)

to prosecute the application to the exclusion of the Inventor(s), and grants Power of Attorney and correspondence address as stated herein.

BEI Technologies, Inc. , hereby appoints:

Practitioners at Customer Number: 29585

as attorneys/agents with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Please direct all written communications relative to this application to:

Please direct all telephone calls to Gerald T. Sekimura at (415) 836-2500

Date: 2/21/07

By:

Printed Name: Mike B. López  
Title: Vice President & General Manager